

PART B - FEE(S) TRANSMITTAL

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Commissioner for Patents
P.O. Box 1450
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SEP 17 2004

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CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

23490 7590 07/02/2004

JOHN G TOLOMEI, PATENT DEPARTMENT
UOP LLC
25 EAST ALGONQUIN ROAD
P O BOX 5017
DES PLAINES, IL 60017-5017

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or for a drawing, must have its own certificate of mailing or transmission.

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Rose A. Lubich	(Depositor's name)
<i>Rose A. Lubich</i>	(Signature)
September 17, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/954,461	09/17/2001	Duncan E. Akporiaye	106245	7556

TITLE OF INVENTION: APPARATUS AND METHOD FOR GENERATING A PLURALITY OF ISOLATED EFFLUENTS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	10/04/2004
EXAMINER	ART UNIT	CLASS-SUBCLASS			
HANDY, DWAYNE K	1743	422-068100			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **JOHN G. TOLOMEI**
2 **FRANK S. MCLINARO**
3 **MARYANN MAAS**

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

UOP LLC

DES PLAINES, ILLINOIS

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee☐ Advance Order - # of Copies _____

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☒ Payment by credit card. Form PTO-2038 is attached.☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of it is form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

9/17/04

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09/17/2004 RFEKADU2 00000084 09954461

01 FC:1501

1330.00 OP

02 FC:1504

300.00 OP

TRANSMIT THIS FORM WITH FEE(S)

PTOL-85 (Rev. 11/03) Approved for use through 04/30/2004.

OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PAGE 2/4 * RCVD AT 9/17/2004 10:03:03 AM [Eastern Daylight Time] * SVR:USPTO-EFXXRF-2/1 * DNS:7464000 * CSID:847 391 2387 * DURATION (mm-ss):03-04



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P.O. Box 5017
Des Plaines, IL 60017-5017
Phone: 847-391-2040
Fax: 847-391-2387

facsimile transmittal

To:	CUSTOMER SERVICE CENTER	Fax:	703-746-4000
Dept:	OFFICE OF PATENT PUBLICATIONS	Phone:	703-305-8283
From:	ROSE LUBICH, Patent Dept.	Date:	9/17/04
Phone:	847-391-2040	Fax:	847-391-2387
Serial Number:	09/954,461	Examiner:	Dwayne K. Handy
Allowance Date:	7/2/04	Art Unit:	1743
Issue Fee Date:	10/4/04	Confirm.No.:	7556
Attachments:	1. PART B - ISSUE FEE TRANSMITTAL; 2. FEE TRANSMITTAL FOR FY 2004; 3. CREDIT CARD FORM PTO-2038.	Pages:	4 including this page.

PLEASE PROCESS THIS ISSUE FEE PAYMENT

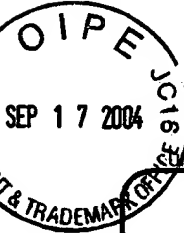
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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$1630)

Complete if Known

Application Number	09/954,461
Filing Date	September 17, 2001
First Named Inventor	Duncan E. Akporiaye
Examiner Name	Dwayne K. Handy
Art Unit	1743
Attorney Docket No.	106245

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit card ☐ Money Order ☐ Other ☐ None
☐ Deposit Account:

Deposit Account Number	
Deposit Account Name	

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s) or any underpayment of fee(s)☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1)			(\$0)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims		-20** =		X	\$18	=	
Independent Claims		-3** =		X	\$86	=	
Multiple Dependent						=	

<u>Large Entity</u>		<u>Small Entity</u>		<u>Fee Description</u>
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for <i>ex parte</i> reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 420	2252 210	Extension for reply within second month	
1253 950	2253 475	Extension for reply within third month	
1254 1,480	2254 740	Extension for reply within fourth month	
1255 2,010	2255 1,005	Extension for reply within fifth month	
1401 330	2401 165	Notice of Appeal	
1402 330	2402 165	Filing a brief in support of an appeal	
1403 290	2403 145	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,330	2453 665	Petition to revive - unintentional	
1501 1,330	2501 665	Utility issue fee (or reissue)	1330
1502 480	2502 240	Design issue fee	
1503 640	2503 320	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 770	2809 385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 770	2810 385	For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	
Other fee (specify) 1504 Publication Fee			300
*Reduced by Basic Filing Fee Paid			
SUBTOTAL (3)			(\$1630)

SUBMITTED BY

Name (Print/Type)	Maryann Maas	Registration No. (Attorney/Agent)	38,954	Telephone	847 391-2137
Signature	<i>Maryann Maas</i>	Date	9/17/04		

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